## FORM D

SEC Mail Mail Processing Section

MAY 12 2008

Washington, DC 106

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D.

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:	April 30, 2008					
Estimated average burden						
house our recoor	16.00					

SEC USE ONLY							
Prefix		Serial I					
	DAT	E RECEIVED					

Name of Offering (		
Morgan Keegan Private Equity Employee Fund of Funds II, L.P. Offering o	f Limited Partnership Intere	ests
Filing Under (Check box(es) that apply):   Rule 504  Rule 505  Rule 506	☐ Section 4(6) ☐ ULOE	
Type of Filing:   New Filing  Amendment		
A. BASIC IDENTIFICATION	DATA	
1. Enter the information requested about the issuer		
Name of Issuer ( check if this is an amendment and name has changed, and indicate char	nge.)	08048659
Morgan Keegan Private Equity Employee Fund of Funds II, L.P.		08040003
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Includi	ng Area Code)
50 North Front Street, 19th Floor, Memphis, TN 38103	(901) 579-4979	
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Includi	ng Area Code)
(if different from Executive Offices)		
<u> </u>		
Brief Description of Business		
Private investment limited partnership		-DOCESSED
The of Decision Occasion (see		PROCESSED  MAY 1 9 2008  THOMSON REUTERS
Type of Business Organization  ☐ corporation ☐ limited partnership, already formed	other (please specify)	0000
□ business trust □ limited partnership, to be formed	d outer (piease speeny)	" MAY 19 ZUUO
Month Year		T TENC
0.5	Actual   Estimated	TIONASON REUIEKO
Actual or Estimated Date of Incorporation or Organization: US 2006   Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrevi		THOMOGIA
CN for Canada; FN for other foreign jurisdiction		
GENERAL INSTRUCTIONS	ction) DE	
Federal:		
a water		15 CCD 400 501

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required. Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity
securities of the issuer;
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
• Each general and managing partner of partnership issuers.
- Each general and managing parties of parties only issues.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director and/or Managing Partner
Full Name (Last name first, if individual)
MK Investment Management, Inc.
Business or Residence Address (Number and Street, City, State, Zip Code)
50 North Front Street, 19th Floor, Memphis, TN 38103
Check Box(es) that Apply:
Full Name (Last name first, if individual)
Koach, John
Business or Residence Address (Number and Street, City, State, Zip Code)
50 North Front Street, 19th Floor, Memphis, TN 38103
Check Box(es) that Apply:    Promoter    Beneficial Owner    Executive Officer    Director and/or Managing Partner
Full Name (Last name first, if individual)
Johnson, Kari L.
Business or Residence Address (Number and Street, City, State, Zip Code)
50 North Front Street, 19th Floor, Memphis, TN 38103
Check Box(es) that Apply:
Full Name (Last name first, if individual)
Maxwell, Charles D.
Business or Residence Address (Number and Street, City, State, Zip Code)
50 North Front Street, 19th Floor, Memphis, TN 38103
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director and/or Managing Partner
Full Name (Last name first, if individual)
Grayson, John H. Jr.
Business or Residence Address (Number and Street, City, State, Zip Code)
50 North Front Street, 19th Floor, Memphis, TN 38103
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director and/or Managing Partner
Full Name (Last name first, if individual)
O'Sullivan, Susannah H.
Business or Residence Address (Number and Street, City, State, Zip Code)
50 North Front Street, 19th Floor, Memphis, TN 38103
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director and/or Managing Partner
Full Name (Last name first, if individual)

☐ Beneficial Owner ☐ Executive Officer ☐ Director and/or Managing Partner

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: ☐ Promoter Full Name (Last name first, if individual)

				B. INFO	RMATIO	N ABOU	T OFFER	RING				
1. Has the issuer	sold, or do	es the issu	er intend	to sell, to 1	non-accre	lited inves	stors in thi	s offering	?		_	No
			Answer	also in A	ppendix, C	Column 2,	if filing u	nder <i>ULO</i>	E.			Œ
2. What is the mi	nimum inv	estment th	nat will be	accepted	from any	individual	?				\$50,00	00.00
3. Does the offer	ing permit	joint own	ership of a	single un	it?						— Yes ⊠	No
4. Enter the info commission or s a person to be lis states, list the na broker or dealer, Full Name (Last	milar remusted is an a me of the you may so	ineration f ssociated broker or et forth the	for solicitate person or dealer. If e informat	ation of pu agent of a more tha	rchasers in broker of n five (5)	n connecti r dealer re persons t	ion with sa gistered w o be listed	ales of sec ith the SE	urities in C and/or	the offerin with a star	any g. If te or	
N/A Business or Resi	dence Addi	ress (Num	ber and St	treet, City,	State, Zip	Code)		<u></u> .				
Name of Associa	ted Broker	or Dealer	· · · · · · · · · · · · · · · · · · ·			,						
States in Which						rchasers						
(Check	"All State:	s" or checl	k <b>i</b> ndividu	al States)						<del></del>	□ All States	8
[AL] [AK] [IL] [IN] [MT] [NE] [RI] [SC]	[AZ] [ IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [NH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Name (Last	name first,	if individ	ual)									
Business or Resi	dence Add	ress (Num	ber and St	treet, City,	State, Zip	Code)						
Name of Associa	ted Broker	or Dealer	•	<del></del>								
States in Which (Check	Person List "All State					rchasers					☐ All State	s
[AL] [AK] [IL] [IN] [MT] [NE] [RI] [SC] Full Name (Last	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [NH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
,			·		6 7:	-0.4.\						
Business or Resi		-		treet, City,	State, Zij	Code)						
Name of Associa	ted Broker	or Dealer	•									
States in Which (Check	Person List "All State				Solicit Pu	rchasers					☐ All State	s
[AL] [AK] [IL] [IN] [MT] [NE] [RII [SC]	[AZ] [ IA] [NV] [SDI	[AR] [KS] [NH]	[CA] [KY] [NJ] [TXI	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [NH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [ PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none or zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt\$	0.00	\$	0.00
	Equity\$	0.00	\$	0.00
	□ Common □ Preferred			
	Convertible Securities (including warrants)\$	0.00	\$	0.00
	Convertible Securities (including warrants) \$ Partnership Interests (Limited Partnership Interests) \$	50,000,000.00		
	Other (Specify:			
	Total \$	0.00	\$	28,290,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			_
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none or zero."			Aggregato
		Number of		Aggregate Dollar Amount
		Investors		of Purchases
	Accredited Investors	102	\$	
	Non-accredited Investors	0	¢	0.00
	Total (for filings under Rule 504 only)		\$	
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
	m c. cc	Type of		Dollar Amount
	Type of offering	Security		Sold
	Rule 505	N/A N/A	\$	N/A N/A
	Regulation A		\$	N/A
	Rule 504	N/A N/A	\$	N/A
	10181	IVA	Φ.	IVA
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	m of Academ	_	•	0.00
	Transfer Agent's Fees	□ <b>≅</b>		5 300 00
	Printing and Engraving Costs			5,300.00
	Legal Fees	æ D		116,667.00
	Accounting Fees Engineering Fees			0.00
	Sales Commissions (specify finders' fees separately)			0.00
	Other Expenses (identify) filing fees	E E		4,200.00
	Other Expenses (identity)	ĸ	D.	4,200.00
	Total	×	\$	126,167.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBI	ER OF INVESTORS, EXPENSES AND	USE	OF	PROCEED	S		
b. Qu the	Enter the difference between the aggregate offering estion 1 and total expenses furnished in response to adjusted gross proceeds to the issuer."	g price given in response to Part C - Part C - Question 4.a. This difference is					<b>s</b> _	49,873,833.00
5.	Indicate below the amount of the adjusted proceed used for each of the purposes shown. If the amou an estimate and check the box to the left of the emust equal the adjusted gross proceeds to the in	nt for any purpose is not known, furnish stimate. The total of the payments listed						
	Question 4.b above.			to I	Payments Officers, Directors, & Affiliates		_	Payments to Others
	Salaries and fees			\$	0.00		\$_	0.00
	Purchase of real estate			\$_	0.00		\$_	0.00
	Purchase, rental or leasing and installation of mach	hinery and equipment		<u>\$</u> _	0.00		\$_	0.00
	Construction or leasing of plant buildings and faci	lities		<b>\$</b> _	0.00		\$_	0.00
	Acquisition of other businesses (including the value that may be used in exchange for the assets or smerger)  Repayment of indebtedness  Working capital  Other (specify): Investment Capital	securities of another issuer pursuant to a		\$_ \$_ \$_ \$_	0.00 0.00 0.00 0.00		_	
	Column Totals Total Payments Listed (column totals added)			<b>\$</b> _	0.00 <b>2</b> \$49,8			49,873,833.00 00
	· · · · · · · · · · · · · · · · · · ·	D. FEDERAL SIGNATURE						
foll	e issuer has duly caused this notice to be signed by the lowing signature constitutes an undertaking by the is its staff, the information furnished by the issuer to an	he undersigned duly authorized person. If suer to furnish to the U.S. Securities and I	Excha	nge (	Commission	ı, up	on v	505, the written request
Mo	uer (Print or Type) organ Keegan Private Equity Employee Fund of nds, II, L.P.	Signature Vullin			Date April 21, 2	2008	3	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)						
	K Investment Management, Inc.	Vice Dunidant of the Conoucl Dantage						
Ву	: Susannah H. O'Sullivan	Vice-President of the General Partner						

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See U.S.C. 1001.)

		E. STATE SIGNATURE								
I.	I. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?									
	s	ee Appendix, Column 5, for state response.								
2.	The undersigned issuer hereby undertakes Form D (17 CFR 239.500) at such times as	to furnish to any state administrator of any state in which this required by state law.	s notice is filed	d, a notice on						
3.	The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the state administrators, upon written request, is	nformation fun	nished by the						
4.	Limited Offering Exemption (ULOE) of the	issuer is familiar with the conditions that must be satisfied to be state in which this notice is filed and understands that the en of establishing that these conditions have been satisfied.	be entitled to issuer claiming	the Uniform						
	e issuer has read this notification and knows dersigned duly authorized person.	the contents to be true and has duly caused this notice to be	signed on its b	ehalf by the						
	suer (Print or Type)	Signature Da	ite							
	organ Keegan Private Equity Employee and of Funds, II, L.P.	Jusama O Fullin	oril 21, 2008							
Na	ime (Print or Type)	Title (Print or Type)								
	K Investment Management, Inc.									
By	: Susannah H. O'Sullivan Vice-President of the General Partner									

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

i	2		3		4				5
	Intend to sell to non-accredited investors in State (Part B-Item 1)  Type of security and aggregate offering price offered in state (Part C-Item 1)				Type of inv amount purch (Part C-	Disqualification under State ULOE (if yes, attach explanation of waiver granted) Part E-Item 1)			
S4_4_	V	31-		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
State	Yes	No	Limited partnership			-	•	103	
AL		X	interests (\$2,980,000)	17	\$2,980,000	0	\$0	· · · · · · <del>- · · -</del>	X
AK		ļ							
ΑZ									
AR		x	Limited partnership interests (\$100,000)	1	\$100,000	0	\$0		x
CA									
					<del></del>				
СО									
CT									
DE						· · · · · · · · · · · · · · · · · · ·			
DC			I imited posts on his						
FL		X	Limited partnership interests (\$1,435,000)	17	\$1,435,000	0	\$0		х
GA		x	Limited partnership interests (\$900,000)	8	\$900,000	0	\$0		Х
HI									
ID									
			Limited partnership				***		
iL		X	interests (\$150,000) Limited partnership	1	\$150,000	0	\$0		Х
IN		X	interests (\$330,000)	3	\$330,000	0	\$0		X
lA									
KS									
KY		x	Limited partnership interests (\$100,000)	2	\$100,000	0	\$0		х
LA		х	Limited partnership interests (\$50,000)	1	\$50,000	0	\$0		x
ме			` · · · · · · · · · · · · · · · · · · ·						
	<u> </u>								
MD	<u> </u>	-							
MA									
Mi					.				
MN	-		I imited and and						
MS		X	Limited partnership interests (\$200,000)	3	\$200,000	0	\$0		X
мо									
мт									

# APPENDIX

1	2	<u> </u>	3		4			D'	5
	Intend to non-acco investors (Part B-	redited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of inv amount purch (Part C-	· · · · · · · · · · · · · · · · · · ·	Disqualification under State ULOE yes, attach explanatio waiver granted) Part E-Item i)		
Stata	Voc	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
State NE	Yes	No		Investors	Allouit	mvestors	runount	103	
NH									
NJ		х	Limited partnership interests (\$700,000)	2	\$700,000	0	\$0		x
NM		!							<u> </u>
NY									
NC		х	Limited partnership interests (\$100,000)	2	\$100,000	0	\$0		x
ND									
ОН	<u> </u>					····			
ок									ļ
OR									<u></u>
PA								<u> </u>	
Rl	ļ <u>.</u>	ļ							
sc		<u>x</u>	Limited partnership interests (\$250,000)	1	\$250,000	0	\$0_		x
SD									ļ
TN		х	Limited partnership interests (\$20,795,000)	40	\$20,795,000	0	\$0		Х
TX		x	Limited partnership interests (\$100,000)	2	\$100,000	0	\$0		x
UT									<u> </u>
VT									
VA_		x	Limited partnership interests (\$100,000)	2	\$100,000	0	\$0		х
WA		ļ			_				
wv	<u> </u>							<u> </u>	
WI		-							
WY		 							-
PR					<u> </u>		<u> </u>	<u> </u>	<u>L</u>

